

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002167

Entity Name: THE ROSE AND JACK ORLOFF CENTRAL AGENCY FOR JEWISH EDUCATION OF BROWARD COUNTY, INC.

FILED
Jan 10, 2014
Secretary of State
CC6775246217

Current Principal Place of Business:

5890 SOUTH PINE ISLAND ROAD
DAVIE, FL 33328

Current Mailing Address:

5890 SOUTH PINE ISLAND ROAD
DAVIE, FL 33328

FEI Number: 03-0429765

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHN, ALAN B ESQ.
100 WEST CYPRESS CREEK ROAD
SUITE 700
FT. LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALAN B. COHN, ESQ.

01/10/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name WIENER, JUDY
Address 5890 SOUTH PINE ISLAND ROAD
City-State-Zip: DAVIE FL 33328

Title VP
Name FRIEDMAN, SHARON
Address 5890 SOUTH PINE ISLAND ROAD
City-State-Zip: DAVIE FL 33328

Title S
Name JOHNSON, BARBARA
Address 5890 SOUTH PINE ISLAND ROAD
City-State-Zip: DAVIE FL 33328

Title T
Name COHN, ALAN
Address 5890 SOUTH PINE ISLAND ROAD
City-State-Zip: DAVIE FL 33328

Title VP
Name ENFIELD, LISA
Address 5890 SOUTH PINE ISLAND ROAD
City-State-Zip: DAVIE FL 33328

Title VP
Name WOLFSON, LYNN
Address 5890 SOUTH PINE ISLAND ROAD
City-State-Zip: DAVIE FL 33328

Title DIRECTOR
Name PAPO, MOSHE
Address 5890 SOUTH PINE ISLAND ROAD
City-State-Zip: DAVIE FL 33328

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DR. MOSHE PAPO

EXECUTIVE DIRECTOR

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date